

**MONTANA BOARD OF PROFESSIONAL ENGINEERS
AND PROFESSIONAL LAND SURVEYORS**

301 South Park Avenue
PO Box 200513
Helena Montana 59620-0513
Phone: 406-841-2017 Fax: 406-841-2309
E-MAIL: dlibsdpels@mt.gov
WEBSITE: www.engineer.mt.gov

APPLICATION PROCEDURES FOR:

ENGINEER INTERN

ILLEGIBLE AND INCOMPLETE APPLICATIONS WILL BE RETURNED.

(Please allow 14 days for processing from the date that the Board has received your complete routine application)

GENERAL INSTRUCTIONS: An applicant for enrollment by exam shall complete the application form in every detail unless otherwise indicated.

ENROLLMENT REQUIREMENTS:

Applicants for enrollment by examination must meet one of the following set of requirements:

1) A graduate of an engineering or engineering technology curriculum of 4 years or more approved by the board. Board will allow students in their last year of school to submit an application and take the examination prior to graduation, but they will not be issued a license until proof of degree awarded is submitted.

2.) A graduate of a related science degree of 4 years or more other than an engineering or engineering technology degree and with 4 years or more of progressive experience in engineering.

FEES:

Payment of fees shall be by money order, personal check or certified check, payable to the Montana Board of PELS. APPLICATION FEES ARE NON REFUNDABLE. Please do not send cash.

Engineer Intern \$25.00

DEADLINE DATES: Examination candidates with or close to completing an ABET or CEAB degree can be approved in the board office Applications must be received postmarked no later than:

FEBRUARY 1

SPRING EXAM

SEPTEMBER 1

FALL EXAM

ATTENTION: STUDENTS OR GRADUATES OF ABET OR CEAB ENGINEERING DEGREES ONLY! You must complete pages 3, 4, 5, 6 and 12 of this application. The remaining experience portions of this application are not necessary if you graduated with or will graduate within one year with a ABET OR CEAB engineering degree.

Those applying with a related science degree must meet the following deadlines.

JANUARY 15	FOR REVIEW AT THE WINTER MEETING FOR SPRING EXAM
APRIL 15	FOR REVIEW AT THE SPRING MEETING FOR FALL EXAM
JULY 15	FOR REVIEW AT THE SUMMER MEETING FOR FALL EXAM

SUPPORTING DOCUMENTATION:

BY EXAMINATION WITH ABET OR CEAB ENGINEERING DEGREE:

Complete all portions of application unless otherwise noted and make arrangements for the following items to be sent directly to the board office:

COLLEGE/UNIVERSITY TRANSCRIPTS: Official transcripts of college credits sent directly to the Board office from the school, college, or university. Transcripts marked "ISSUED TO STUDENT" **will not** be accepted.

EXAMINATION DATES AND DISCIPLINES OFFERED:

Spring Examination Dates:

April 25, 2009	April 17, 2010
April 9, 2011	April 14, 2012

Fall Examination Dates:

October 24, 2009	October 30, 2010
October 29, 2011	October 27, 2012

APPLICATION PROCEDURES

- ♦ When a routine application file is complete, it will be processed and scheduled for the exam. The applicant may be notified if additional information is required or if the applicant will be required to appear before the Board during a regularly scheduled Board meeting.
- ♦ If the application is considered a non-routine application, there may be a delay in processing of the application. You may be requested to provide additional information, or make a personal appearance before the Board during a regularly scheduled Board meeting. Non-routine applications may take up to 120 days to process. The Board encourages the applicants to attend the meeting however, if you are unable to attend you will be notified of the Board's decision in writing.
- ♦ Keep the Board office informed at all times of any address changes or name changes. This is essential for timely processing of applications and subsequent licensure.

Non-routine applications could be subject for Board review if you have answered yes to any of the questions on pages 4 and 5 of the application.

MONTANA BOARD OF PEPLS

PO Box 200513

301 South Park Ave, 4th Floor

Helena MT 59620 - 0513

Phone: (406) 841-2017 Fax: (406) 841-2309

E-mail: dlibsdpels@mt.gov

Website: [http:// www.engineer.mt.gov](http://www.engineer.mt.gov)

ILLEGIBLE AND INCOMPLETE APPLICATIONS WILL BE RETURNED.

(Please allow 14 days for processing from the date that the Board has received your complete routine application)

APPLICATION FOR ENGINEER INTERN

ENGINEER INTERN \$25.00

If applying during your last year of school, a representative of the school must sign to indicate that core-engineering curriculum has been completed before application is accepted.

School Representative Signature _____ Date _____

Remaining information to be filled out by Applicant:

Full Name _____
Last First Middle

Other Name(s) Known By _____

Gender _____ Date of Birth _____

E-mail Address _____

Please indicate your preferred mailing address ____ Home or ____ Business

Residential Information

Phone _____

Fax _____

Address _____

Zip Code _____

City, State _____

Business (Present Employer) Information

Phone _____

fax _____

Address _____

Zip Code _____

City, State _____

Business Name _____

PLEASE CHOOSE AN EXAM LOCATION ____ BUTTE ____ BOZEMAN ____ HAVRE [spring only]

ENGINEER INTERN APPLICATION

Revised 1/2009

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All applicants must answer the following questions. If you answer, "yes" to any of these questions, attach a detailed explanation on a supplemental sheet containing names of organizations, dates, reasons, and outcome. If you answer "yes" to any question that relates to disciplinary action, attach copies of the document that initiated each action and all final orders. Section 37-1-105 MCA, requires that you report this information. Failure to accurately furnish this information is grounds for denial or revocation of your license.

1. Have you ever had an application for a professional or occupational license refused or denied? If yes, please attach a detailed explanation and provide supporting documentation from the source.
☐ Yes
☐ No
2. Have you ever withdrawn an application for licensure prior to the licensing agency's decision regarding your application? If yes, please attach a detailed explanation and provide supporting documentation from the source.
☐ Yes
☐ No
3. Have you ever been denied the privilege of taking an examination required for any professional or occupational license? If yes, please attach a detailed explanation and provide supporting documentation from the source.
☐ Yes
☐ No
4. Have you ever withdrawn or been suspended, placed on probation, expelled or requested to resign from any postsecondary educational program? If yes, please attach a detailed explanation and provide supporting documentation from the source.
☐ Yes
☐ No
5. Have you ever requested temporary or permanent leave of absence, been placed on probation, restricted, suspended, revoked, allowed to resign, or otherwise acted against by any professional or occupational education program (i.e., residency, internship, apprenticeship, etc)? If yes, please attach a detailed explanation and provide supporting documentation from the source.
☐ Yes
☐ No
6. Has a licensing agency initiated or completed disciplinary action against any professional or occupational license you have held? If yes, please provide agency documents including the complaint, initiating documents, orders, final orders, stipulations and consent and/or settlement agreements directly from the source.
☐ Yes
☐ No
7. Have you ever voluntarily surrendered, cancelled, forfeited, failed to renew a professional or occupation license in anticipation of or during an investigation or disciplinary proceedings or action? If yes, please attach a detailed explanation and provide supporting documentation from the source.
☐ Yes
☐ No
8. Has a complaint ever been made against you with a professional or occupational licensing agency? If yes, please attach a detailed explanation and provide supporting documentation from the source.
☐ Yes
☐ No

9. Have you ever been censured, expelled, denied membership or asked to resign from a professional organization related to your professional or occupation? If yes, please attach a detailed explanation and provide documentation from the source.
- ☐ Yes
- ☐ No
10. Have you ever been the subject of any sanction or action, denial, suspension, revocation, restriction or termination regarding your ability to prescribe, dispense or administer drugs including controlled substances? If yes, please attach a detailed explanation and provide documentation from the source.
- ☐ Yes
- ☐ No
11. Do you have any initiated or completed action against you by any state, federal, tribal, or foreign licensing jurisdiction? (For example: Drug Enforcement Agency; Alcohol, Tobacco and Firearms; Homeland Security; Indian Health Service, etc) If yes, please attach a detailed explanation and provide documentation from the source.
- ☐ Yes
- ☐ No
12. Have any civil legal proceedings been filed against you by a employer/employee? If yes, attach a detailed explanation and documentation from the source including initiating document(s) and documentation of final disposition.
- ☐ Yes
- ☐ No
13. Do you have any criminal charges pending or have you ever pled guilty, forfeited bond, or been convicted of a crime (whether or not sentence was suspended or deferred), or have you pled no contest or had prosecution deferred whether or not an appeal is pending? If yes, attach a detailed explanation and documentation from the source. You must report but may omit documentation for: (1) misdemeanor traffic violations resulting in fines of less than \$100; and (2) charges or convictions prior to your 18th birthday unless you were tried as an adult.
- ☐ Yes
- ☐ No
14. Have you ever been diagnosed with chemical dependency or another addiction, or have you participated in a chemical dependency or other addiction treatment program? If yes, please attach a detailed explanation and provide documentation regarding evaluations, diagnosis, treatment recommendations and monitoring from the source.
- ☐ Yes
- ☐ No
15. Have you ever been diagnosed with a physical condition or mental health disorder involving potential health risk to the public? If yes, please provide a detailed explanation.
- ☐ Yes
- ☐ No
16. Have you ever been courts martial or discharged other than honorably from any branch of the armed service? If yes, attach a detailed explanation and documentation for the source.
- ☐ Yes
- ☐ No

QUALIFICATIONS USING TO APPLY FOR LICENSURE: (CHECK ONE)☐

4 year engineering degree or in the last year of engineering program and approved by school representative

☐

4 year related science degree, 4 years of engineering experience.

EDUCATION:

List all colleges, universities, and institutions where you have obtained an official engineering or related science degree. Official transcripts must be sent directly to the Board Office from the college or university. If you are in the final year of school and approved for examination, final transcripts will be required to be issued an Engineer Intern license in Montana.

Name of University or College	City and State/Province/Territory	Dates Attended	Degree Earned

PROFESSIONAL & CHARACTER REFERENCES:

Please type or print names and addresses of 3 references.

Name:
Address:
Telephone Number:

Name:
Address:
Telephone Number:

Name:
Address:
Telephone Number:

Administrative Rules of Montana (ARM) 24.183.702 "CLASSIFICATION OF EXPERIENCE"

(1) Engineering experience shall include the following:

(a) Sub-professional experience gained before graduation. This experience shall be credited to the required pre-professional experience at a maximum of one-half the period of experience. Credible experience may include:

- (i) engineering experience, supervised;
- (ii) construction experience, supervised.

(b) Pre-professional experience is four years of total progressive experience, all of which is required to be completed at the time of application. Credible experience may include:

- (i) approved sub-professional experience;
- (ii) progressive experience on engineering/land surveying projects which indicate the experience is of increasing quality and required greater responsibility;
- (iii) experience not obtained in violation of the licensure act;
- (iv) experience gained under the supervision of a licensed professional engineer/land surveyor or, if not, an explanation of why the experience should be considered acceptable;
- (v) credible teaching experience at an advanced level, post graduate or senior graduate, in a college or university offering an engineering curriculum of four years or more that is approved by the board.

(vi) experience gained in engineering research and design projects by members of an engineering faculty, in an engineering curriculum approved by the board;

(vii) successful completion of graduate study leading to the master's degree in engineering, which has followed a baccalaureate degree in engineering, as credit for one year's experience. If the Ph.D. in engineering is completed under the same conditions, two year's total experience may be credited, including the one year credited for the master's degree, in the two year's total. If the Ph.D. is obtained without the master's degree, two year's experience may be credited. All degrees shall have been obtained from colleges or universities with board approved programs.

(2) Experience must be completed at the time of application. Experience time cannot be counted during periods counted for education.

(3) Experience should be gained under the supervision of a registered professional engineer or, if not, an explanation should be made showing why the experience should be considered acceptable.

(4) Upon request by the board, an applicant must demonstrate knowledge of fundamental principles of engineering design and the practical solution of engineering problems.

(History: Sec. 37-67-202, MCA; IMP, Sec. 37-67-306, 37-67-309, MCA; Eff. 12/31/72; AMD, 1978 MAR p. 903, Eff. 6/24/78; AMD, 1979 MAR p. 1687, Eff. 12/28/79; TRANS, from Dept. of Prof. & Occup. Lic., C. 274, L. 1981, Eff. 7/1/81; AMD, 1986 MAR p. 1958, Eff. 11/29/86; AMD, 1998 MAR p. 534, Eff. 2/27/98.)

RESUME OF EXPERIENCE:

Experience time entered in this portion of the application is defined in ARM 24.183.702 (see page 6).

- a. New applicants must fill out columns (1) and (2) under the "Experience" heading below. Comity applicants must fill out column (3) under the "Experience" heading below. Enter years of experience in years and months. Overtime does not count as extra time.
- b. For new applicants, time in sub-professional work is identified in column (1). Enter the total years of sub-professional work identified in column (1) on Line 5. Then multiply the total sub-professional years by 0.5 and write the result in column (1) Line 7. Sub-professional experience is awarded up to a one year maximum. The value entered in column (1) on Line 7 cannot exceed 1.0 year.

Engagement #	DATES		TITLE OF POSITION & NAME OF EMPLOYER Denote your title and name of employer in this column. This page of the application is a summary sheet of your experience. Use extra sheets to explain in detail your experience with each firm. Describe specific projects and your level of responsibility for the project. The Board will determine from the information presented whether or not you meet Montana's current requirements.	EXPERIENCE Years and months (Please sum the total years and months of experience at the bottom of this page)				Name, license # and present address of someone familiar with each engagement, preferably by your immediate supervisor. (Please do not put down deceased persons).
	From	To		(1) Time In sub-prof. work		(2) Time In pre-prof. work		
				Yr	Mo	Yr	Mo	
	PLEASE USE EXTRA SHEETS TO EXPLAIN IN DETAIL If you do not explain in sufficient detail, your application will be returned, and you will be requested to provide a more detailed description of your engineering experience. Explain your engineering experience in detail on the extra sheets.							
1.0			Title: Name of Employer:					
2.0			Title: Name of Employer:					
3.0			Title: Name of Employer:					
4.0			Title: Name of Employer:					
			Line 5: Total of sub-professional Work					
			Line 6: x	0.5	0.5			
			Line 7: Total of experience time (Maximum of 1 year will be counted for Sub Professional Experience)					

Note: This sheet can be duplicated if more than four (4) engagements.

Example

RESUME OF EXPERIENCE

Engagement #	DATES		TITLE OF POSITION & NAME OF EMPLOYER Denote your title and name of employer in this column. This page of the application is a summary sheet of your experience. Use extra sheets (see example on following pages) to explain in detail your experience with each firm. Describe specific projects and your level of responsibility for the project. The Board will determine from the information presented whether or not you meet Montana's current requirements.	EXPERIENCE Years and months (Please sum the total years and months of experience at the bottom of this page)				Name, license # and present address of someone familiar with each engagement, preferably by your immediate supervisor. (Please do not put down deceased persons).
	From	To		(1) Time In sub-prof. work		(2) Time In pre-prof. work		
				Yr	Mo	Yr	Mo	
	1. 0	9/2/99		10/1 2/02	Title: Project Engineer Name of Employer: Albany Engineers, Inc.			
2. 0	2/1/97	9/1/9 9	Title: Engineer Name of Employer: Bailey Engineers, Inc.			2	7	John Smith 12345PE 1001 South Park Boise Idaho 83900
3. 0	5/1/96	8/30/ 96	Title: Summer Intern Engineer Name of Employer: Rocky Exploration, Inc.		4			John Olson 12345PE 3001 South Park Denver Colorado 59000
4. 0	1/2/96	6/1/9 6	Title: Co-op Engineer Name of Employer: Bailey Engineers, Inc.		6			John Mitchell 12345PE 1001 South Park Boise Idaho 83900
			Line 5: Total of sub-professional Work	0	10			
			Line 6: x	0.5	0.5			
			Line 7: Total of experience time (Maximum of 1 year will be counted for Sub Professional Experience)	0	5	3	8	

PLEASE USE EXTRA SHEETS TO EXPLAIN IN DETAIL

If you do not explain in sufficient detail, your application will be returned, and you will be requested to provide a more detailed description of your engineering experience. Explain your engineering experience in detail on the extra sheets.

Experience Detail Sheet

(You may duplicate this sheet with a word processor or copy machine)

Engagement #: _____

Title: _____

Employer: _____

Dates of Employment: From: _____ to _____

Description of Duties:

Use extra sheets to explain in detail your experience with each firm. Describe specific projects and your level of responsibility for the project. The Board will determine from the information presented whether or not you meet Montana's current requirements.

[illegible]

Example

EXPERIENCE DETAIL SHEET

Engagement #: 1

Title: Project Engineer

Employer: Albany Engineers

Dates of Employment: From: 9/2/99 to 10/12/02

Description of Duties:

Use extra sheets to explain in detail your experience with each firm. Describe specific projects and your level of responsibility for the project. The Board will determine from the information presented whether or not you meet Montana's current requirements.

Typical duties included engineering design, issuance of engineering change notices, construction inspection, and oversight of completion of as built drawings McCleod River Bridge Project:

I was responsible for preliminary design of a bridge to cross the McCleod River where a previous bridge had

failed. Tasks included design of footings in an area with high clay content soils. Also provided stress and strain analysis of bridge components.

McCleod County Irrigation Project: I was responsible for design of an irrigation system covering 160 acre area. I calculated water

requirements, pump requirements and specified piping for the project. The project was constructed and performed as designed.

AFFIDAVIT

I authorize the release of information concerning my education, training, record, character, license history and competence to practice, by anyone who might possess such information, to the Montana Board of Professional Engineers and Professional Land Surveyors.

I hereby declare under penalty of perjury the information included in my application to be true and complete to the best of my knowledge. In signing this application, I am aware that a false statement or evasive answer to any question may lead to denial of my application or subsequent revocation of licensure on ethical grounds. I have read and am familiar with the applicable licensure laws of the State of Montana and instructions to applicants for licensing. I accept the rules and procedures outlined in these documents as the basis for my application.

Applicant Signature_____ Date_____